

## STATE OF SOUTH DAKOTA CLASS SPECIFICATION

**Class Title: Medical Facilities Engineer**

**Class Code: 40822**

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### **A. Purpose:**

Reviews health care facility construction plans and inspects health care facilities to ensure conformance with Life Safety Code standards and state regulations.

### **B. Distinguishing Feature:**

Medical Facilities Engineer conducts construction plan reviews, inspects construction activities, and completes facility inspections as an engineer.

Medical Facilities Engineer Supervisor supervises Medical Facilities Engineers, participates in facility inspections, inspects construction sites, and evaluates equivalent alternatives to code compliance, reviews contract documents, and initiates licensure/certification of a facility.

### **C. Functions:**

*(These are examples only; any one position may not include all of the listed examples nor do the listed examples include all functions which may be found in positions of this class.)*

1. Reviews health care facilities remodeling, addition, and new construction documents for compliance with state and federal regulations.
  - a. Examines blue prints, plans, specifications, and drawings.
  - b. Determines code and regulation compliance equivalencies and/or deficiencies.
  - c. Provides written reports to architects and facilities on changes that must be incorporated into contract documents.
  - d. Approves construction documents.
  - e. Conducts follow-up construction inspections on health care facilities to ensure compliance with Life Safety Codes.
  - f. Provides written reports on items that need correction prior to licensing.
2. Conducts Life Safety Code inspections of health care facilities to ensure compliance with state and federal regulations.
  - a. Contacts facility administrators and explains procedures and codes.
  - b. Conducts walk-through inspections of facilities.
  - c. Notes deficiencies or problems that can be corrected immediately.
  - d. Briefs facility administrators of inspection findings.
  - e. Prepares written reports of inspection findings.
  - f. Reviews and approves facilities' plans for correction.
  - g. Contacts or inspects facilities to verify that facilities have corrected deficiencies.
3. Provides consultation and technical assistance to providers, architects, engineers, communities, and other agencies on issues relating to construction codes, regulations, and standards.
4. Completes contract services for other agencies to ensure compliance with state and federal codes and regulations.
  - a. Performs building analysis and evaluates resident capabilities according to building construction standards.
  - b. Reviews facility evacuation plans and the staff's and facility's ability to ensure resident

safety.

5. Performs other work as assigned.

**D. Reporting Relationships:**

Reports to a Medical Facilities Engineer Supervisor and typically does not supervise.

**E. Challenges and Problems:**

Challenged to maintain knowledge of the many codes, regulations, and standards affecting construction of health care facilities. This is difficult because codes are reviewed, rewritten or deleted yearly. Codes have to be interpreted as they were intended to be interpreted and buildings have been built to different code standards based on the time of construction.

Typical problems include resolving differences in opinions on code interpretations between architects/engineers and the Department of Health, facility administrators and/or contractors not aware of code changes affecting completed projects, and working with administrators who are not familiar with construction practices and minimum construction standards for their health care facility.

**F. Decision-making Authority:**

Decisions include whether contract documents are in compliance with codes and regulations, determining survey deficiencies and their severity, approving corrective actions health care providers can make, and what items require corrective action by architects or engineers.

Decisions referred to a superior include whether construction documents will be approved, if a health care facility's certification will be terminated, and the revocation of a license.

**G. Contact with Others:**

Daily contact with health care facility administrators, architects, and engineers to discuss and verify construction projects and surveys; and weekly contact with other programs and agencies to discuss surveys or construction issues.

**H. Working Conditions:**

The incumbent works in a typical office environment and must travel to complete construction and facility inspections.

**I. Knowledge, Skills and Abilities:**

Knowledge of:

- engineering principles and practices;
- effective methods of construction supervision;
- codes and standards pertinent to the construction of health care facilities;
- mechanical and electrical engineering.

Ability to:

- deal effectively with others;

- plan, organize, and assign work;
- read and interpret blueprints and architectural drawings;
- understand and apply construction codes and standards.